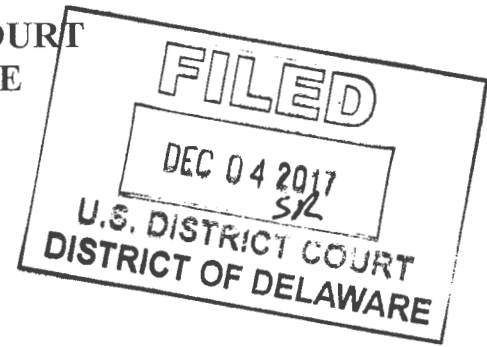


(Del. Rev. 11/14) Pro Se Prisoner Civil Rights Complaint

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE

William Sewell H

(In the space above enter the full name(s) of the plaintiff(s).)



Civ. Action No. 17 - 1743
(To be assigned by Clerk's
Office)

-against-

SSI Disability, Unknown Disability
SSI Social Worker, Unknown Disability
SSI Social Worker

COMPLAINT
(Pro Se Prisoner)

Jury Demand?

☒ Yes

☐ No

(In the space above enter the full name(s) of the defendant(s).

If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section IV. Do not include addresses here.)

NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

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I. COMPLAINT

Indicate below the federal legal basis for your claim, if known. This form is designed primarily for pro se prisoners challenging the constitutionality of their conditions of confinement, claims which are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Check one:

- ☒ 42 U.S.C. § 1983 (state, county, or municipal defendants)
- ☐ Action under *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971) (federal defendants)

II. PLAINTIFF INFORMATION

Sewell William H
Name (Last, First, MI) Aliases

00155397
Prisoner ID #

Sussex Correctional Institution
Place of Detention

P.O. Box 500
Institutional Address

Sussex Georgetown De 19947
County, City State Zip Code

III. PRISONER STATUS

Indicate whether you are a prisoner or other confined person as follows:

- ☒ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner

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IV. DEFENDANT(S) INFORMATION

Please list the following information for each defendant. If the correct information is not provided, it could result in the delay or prevention of service. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1: Unknown Disability Social Worker State of DE
Name (Last, First)

Current Job Title

Current Work Address

County, City State Zip Code

Defendant 2: Unknown Disability Social Worker State of DE
Name (Last, First)

Current Job Title

Current Work Address

County, City State Zip Code

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Defendant(s) Continued

Defendant 3:

SST D. Sab LJ
Name (Last, First)

Current Job Title

Current Work Address

County, City State Zip Code

Defendant 4:

Name (Last, First)

Current Job Title

Current Work Address

County, City State Zip Code

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V. STATEMENT OF CLAIMPlace(s) of
occurrence:Georgetown De (on phone) Lewis, DeDate(s) of occurrence: Nov. 16, 2015, March 4, 2016

State which of your federal constitutional or federal statutory rights have been violated:

Right to due process or fair hearing
decision to appeal

State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions, state whether you were physically injured as a result of those actions, and if so, state your injury and what medical attention was provided to you.

FACTS:

What
happened to
you?

I was incarcerated in Sussex Correctional Institute. I was called by the counselor on November 16, 2015 there was a hearing set up for me by telephone a teleconference about my disability claim to an unknown SSI Disability Social Worker. I did the interview answered all the questions then I never heard from the worker ever again. I later was released from prison and then I filed for Disability benefits again on March 4, 2016 I was informed by the unknown Disability Social worker that my claim was denied. So the problem is I never received the denial or decision letter they never told me anything nor did they send me a letter stating

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Who did
what?

that I was denied. So I could not appeal the decision. I have been trying to get Disability for the past ten years. The unknown Social Worker at Disability on March 4, 2016 stated that I got denied and I am entitled to get all of my back pay because when the workers did the interview on Nov 16, 2015 they knew where I was at and they did not send me the letter of denial they deprived me of my constitutional rights to appeal the decision in my case they never tried to contact me again on anything denying my right to a fair hearing or to contest the decision

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Was anyone
else
involved?

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VI. ADMINISTRATIVE PROCEDURES

WARNING: Prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions. 42 U.S.C. § 1997e(a). Your case may be dismissed if you have not exhausted your administrative remedies.

Is there a grievance procedure available at your institution? ☒ Yes ☐ No

Have you filed a grievance concerning the facts relating to this complaint? ☐ Yes ☒ No
If no, explain why not:

Not against the prison

Is the grievance process completed? ☐ Yes ☒ No
If no, explain why not:

not against prison

VII. RELIEF

State briefly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

All of my back pay for the time I
started this claim and 1 million dollars
for the suffering and pain I've gone through
the mental abuse

The “three strikes rule” bars a prisoner from bringing a civil action or an appeal in forma pauperis in federal court if that prisoner has “on three or more occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. §1915(g).

☐ Yes ☒ No

- Name of case (including defendants' names), court, and docket number
- Nature of claim made
- How did it end? (For example, if it was dismissed, appealed, or is still pending, explain below.)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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IX. PLAINTIFF'S DECLARATION AND WARNING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; and (3) complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Plaintiff must sign and date the complaint and provide prison identification number and prison address.

11/30/17
Dated

William H. Sewell
Plaintiff's Signature

Sewell William
Printed Name (Last, First, MI)

00158397
Prison Identification #

SUSSEX CORRECTIONAL INSTITUTE
PO BOX 500 Georgetown DE 19947
Prison Address City State Zip Code

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.



U.S.M.S.
X-RAY

Clerk
U.S. District Court
844 N. King Street
Wilmington Del
19801